

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of )  
)  
Gaydos *et al.* ) Art Unit: 2151  
)  
Application No. 10/611,360 ) Examiner: Djenane M. Bayard  
)  
Filing Date: June 30, 2003 ) Confirmation No.: 2659  
)  
For: METHOD, APPARATUS, AND SYSTEM FOR )  
ASYMMETRICALLY HANDLING CONTENT )  
REQUESTS AND CONTENT DELIVERY )

**TRANSMITTAL LETTER**

**Mail Stop AMENDMENT**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.  
Customer Number 23859

January 15, 2008

Sir:

Transmitted herewith is/are the following in the above-identified application:

- |                                     |                            |                                     |                                |
|-------------------------------------|----------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Response to Office Action  | <input checked="" type="checkbox"/> | Petition For Extension of Time |
| <input checked="" type="checkbox"/> | Fee as calculated below    | <input type="checkbox"/>            | Supplemental Declaration       |
| <input type="checkbox"/>            | No Additional Fee Required | <input type="checkbox"/>            | Terminal Disclaimer            |
| <input type="checkbox"/>            | Corrected Drawings         | <input type="checkbox"/>            | Other _____                    |

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	49		57	0	X \$50.00	\$0.00
Independent Claims	3		3	0	X \$210.00	\$0.00
	<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				+ \$370.00	\$0.00
EXTENSION FEE	1 <sup>st</sup> Month \$120 <input type="checkbox"/>	2 <sup>nd</sup> Month \$460 <input checked="" type="checkbox"/>	3 <sup>rd</sup> Month \$1050 <input type="checkbox"/>	4 <sup>th</sup> Month \$1640 <input type="checkbox"/>	5 <sup>th</sup> Month \$2230 <input type="checkbox"/>	\$460.00
<input checked="" type="checkbox"/> Reduction by 1/2 for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -						- \$230.00
TOTAL FEE DUE						\$230.00

**ATTORNEY DOCKET NO. 03224.0003U1**  
**APPLICATION NO. 10/611,360**

Payment:

- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Payment by credit card in the amount of \$\*\*\*\* for the fees designated above is submitted via enclosed Form PTO-2038.
- ☒ Payment by credit card in the amount of \$230.00 for the fees designated above is submitted via EFS-Web.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$\_\_\_\_\_ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

NEEDLE & ROSENBERG, P.C.

          / Jason S. Jackson /            
Jason S. Jackson  
Registration No. 56,733

NEEDLE & ROSENBERG, P.C.  
Customer Number 23859  
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